

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 1 OF 2  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>CLUB FOR GROWTH ACTION</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00487470
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee <b>Catamaran Consulting, LLC</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>04 / 13 / 2021</b>
Mailing Address 5042 Wilshire Blvd. Suite 45064		Amount <b>13375.00</b>
City Los Angeles	State CA	Zip Code 90036
Purpose of Expenditure mail production, postage	Category/ Type	Transaction ID : <b>SE.4886</b> Date of Disbursement or Obligation MM / DD / YYYY <b>04 / 12 / 2021</b>
Name of Federal Candidate ELLZEY, JOHN KEVIN SR, ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>06</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>TX</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ► <b>Special-General</b>

Full Name of Payee <b>Club for Growth</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>04 / 13 / 2021</b>
Mailing Address 2001 L ST, NW, STE 600		Amount <b>162.93</b>
City Washington	State DC	Zip Code 20036
Purpose of Expenditure mail production (from advance line 21)	Category/ Type	Transaction ID : <b>SE.4891</b> Date of Disbursement or Obligation MM / DD / YYYY <b>04 / 13 / 2021</b>
Name of Federal Candidate ELLZEY, JOHN KEVIN SR, ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>06</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>TX</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ► <b>Special-General</b>

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>13537.93</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Rozansky, Adam, ,

[Electronically Filed]

Date

 MM / DD / YYYY  
**04 / 14 / 2021**

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 2 OF 2  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>CLUB FOR GROWTH ACTION</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00487470
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>WPAi</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>04 / 13 / 2021</b>
Mailing Address 3317 E Memorial Suite 201		Amount <b>200.00</b>
City <b>Edmond</b>	State <b>OK</b>	Zip Code <b>73013</b>
Purpose of Expenditure data analytics	Category/ Type	Transaction ID : <b>SE.4889</b> Date of Disbursement or Obligation MM / DD / YYYY <b>04 / 13 / 2021</b>
Name of Federal Candidate <b>ELLZEY, JOHN KEVIN SR, ,</b>		Office Sought: <input checked="" type="checkbox"/> House    District: <b>06</b> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>TX</b>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ <b>Special-General</b>

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address		Amount
City	State	Zip Code
Purpose of Expenditure	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate		Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate    State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>200.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<b>13737.93</b>

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Rozansky, Adam, , ,

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Date

MM / DD / YYYY  
**04 / 14 / 2021**

Signature